Fill	in this informati	ion to identify your case								
	btor 1	Catherine S Edw	ards							
De	btor 2	First Name	Mide	dle Name	Last N	Name				
(Sp	oouse if, filing)	First Name	Midd	dle Name	Last N	Name				
Un	ited States Bank	kruptcy Court for the:	EASTER	N DISTRICT OF I	MISSOURI					
	se number							_		
(if I	known)								Check if this amended filin	
R,	103A									
		for Individual	s to Pay	the Filing	Fee in I	nstallme	nts			12/15
Be a	as complete an	nd accurate as possib	le. If two ma	arried people are				e for sup	pplying correct	:
	•	ify Your Proposed Pa	•	_						
1.		ter of the Bankruptcy ig to file under?	Code are	Chap	oter 7 oter 11					
				≒ •. ·	oter 12 oter 13					
2.		ply to pay the filing fe		You propose						
		nents. Fill in the amou pay and the dates you								
		e sure all dates are buadd the payments you				[a] \A/:4b, 4b, a. £	iliaa afaba aasisiaa			
	to pay.	add the payments you	i propose	\$ 155	.00		iling of the petition ore this date			
	You must pro	pose to pay the entire f	ee no					MM	/ DD/ YYYY	
	later than 120 days after you file this bankruptcy case. If the court approves your application, the court will set your final			\$		On or before	this date	MM	/ DD/ YYYY	
				(X) or, balance to be paid through plan by Chapter 13 Trustee.						
	payment time	table.		\$		On or before	this date			
				•		On or before	this date	MM	/ DD/ YYYY	•
				+ \$		On or before	iriis date	MM	/ DD/ YYYY	
				¢ 310.0	00					
			Total	\$310.0		total must equ	al the entire fee for t	he chapte	er you checked i	n line 1.
Pa	rt 2: Sign	Below								
Bv :	sianina here. v	ou state that you are	unable to p	av the full filing f	ee at once.	that vou wan	t to pay the fee in i	nstallme	nts. and that v	ou
	lerstand that:	•	·		·	•				
		nust pay your entire filir arer, or anyone else for s					/ more property to an	attorney,	, bankruptcy pet	ition
		must pay the entire fee redischarged until your			ı first file for l	bankruptcy, ur	less the court later e	xtends yo	our deadline. Yo	ur debts will
	_ If you	do not make any paym fected.			ptcy case ma	ay be dismisse	ed, and your rights in	other bar	nkruptcy procee	dings may
X	/s/ Catherin	e S Edwards	х			x	/s/ Leigh Kline			
	Catherine S Edwards Signature of Debtor 1			Cianatura of Dalet	or 0	Leigh Kline 649			anoturo if	and car
	Signature of Debtor 1		Signature of Debtor 2		Your attorney's nar		ie and si	gnature, ir you u	sea one	
	Date Dece	ember 7, 2015		Date			Date Decembe	er 7. 20	15	
		DD / YYYY		MM / DD /	YYYY		MM/ DD / Y		`	

Fill in this information to identify the case:										
Debtor 1	Catherine S Edwards									
	First Name	Middle Name	Last Name							
Debtor 2										
(Spouse if, filing)	First Name	Middle Name	Last Name							
United States Bankrup Case number (if known Chapter filing under:	•	EASTERN DISTRICT OF	Chapter 7 Chapter 11 Chapter 12 Chapter 13							